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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

FEB 11 2002

Application Number	09/993,299
Filing Date	11-23-2001
First Named Inventor	Reynolds
Title	SYSTEM FOR FILLING AND ASSEMBLING PHARMACUETICAL DELIVERY DEVICES
Group Art Unit	3763
Examiner Name	
Attorney Docket Number	8080

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☐ Practitioners at Customer Number [　　　　] ➔ Place Customer Number Bar Code Label here

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☒ Practitioner(s) named below:

Name	Registration Number
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Charles R. Rust	18,716

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☐ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
　　Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name	David L. Reynolds
Signature	
Date	07/01/02

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☐ *Total of _____ forms are submitted.